

# House File 795 - Introduced

HOUSE FILE 795  
BY COMMITTEE ON EDUCATION

(SUCCESSOR TO HF 167)

## A BILL FOR

1 An Act relating to seizure disorders and establishing certain  
2 requirements for school districts, accredited nonpublic  
3 schools, and the department of education.  
4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1     Section 1. NEW SECTION.   280.13D   Seizure action plan and  
2 training requirements.

3     1. For purposes of this section, unless the context  
4 otherwise requires:

5     *a. "Individual health plan"* means the confidential, written,  
6 preplanned, and ongoing special health service developed for a  
7 student who requires such service to be incorporated with the  
8 student's educational program.

9     *b. "School personnel"* means principals, guidance counselors,  
10 teachers, and other relevant employees who have direct contact  
11 with and supervise children, including school bus drivers and  
12 paraeducators.

13    *c. "Seizure action plan"* means a written set of instructions  
14 designed to direct caregivers and staff to intervene in the  
15 event of a seizure occurrence and is considered a plan for  
16 emergencies as a part of an individual health plan.

17    2. *a.* Commencing with the school year beginning July 1,  
18 2022, the board of directors of each school district and the  
19 authorities in charge of each nonpublic school shall have  
20 at least one school employee at each school who has met the  
21 training requirements necessary to administer or assist with  
22 the self-administration of all of the following:

23       (1) A seizure rescue medication or medication prescribed  
24 to treat seizure disorder symptoms as approved by the United  
25 States food and drug administration.

26       (2) A manual dose of prescribed electrical stimulation  
27 using a vagus nerve stimulator magnet as approved by the United  
28 States food and drug administration.

29    *b.* The presence of a registered nurse employed full-time  
30 by a school district or nonpublic school who assumes  
31 responsibility for the administration of seizure medications,  
32 and the administration oversight of vagus nerve stimulation,  
33 fulfills the requirements of paragraph "a". This section shall  
34 not be construed to require school personnel, other than a  
35 registered nurse, to administer a suppository to a student.

1     3. Every school attendance center shall provide training  
2 to all school personnel on the recognition of the signs and  
3 symptoms of seizures and the appropriate steps for seizure  
4 first aid.

5     4. Any training programs or guidelines adopted by any state  
6 agency for the training of school personnel in the health care  
7 needs of students diagnosed with a seizure disorder shall  
8 be fully consistent with training programs and guidelines  
9 developed by the epilepsy foundation of America and any  
10 successor organization.

11    5. Each school district shall require school personnel or  
12 volunteers responsible for the supervision or care of students  
13 to undergo approved seizure recognition and first aid training  
14 on a biennial basis.

15    6. Nothing in this section shall be construed to limit the  
16 authority of a school district or the department of education  
17 to require additional seizure disorder training.

18    7. *a.* Prior to school personnel administering a seizure  
19 rescue medication or medication prescribed to treat a student's  
20 seizure disorder symptoms, the student's parent or guardian  
21 shall provide the school with a signed and dated written  
22 authorization requesting medication administration at school  
23 that meets the requirements of the school's medication  
24 administration policy and procedures established in accordance  
25 with 281 IAC 14.1.

26    *b.* The parent or guardian of each student diagnosed with  
27 a seizure disorder may collaborate with licensed health care  
28 professionals, including the school nurse or education team,  
29 in the development of an individual health plan, and a seizure  
30 action plan if appropriate, consistent with rules adopted by  
31 the state board of education. The individual health plan or  
32 seizure action plan, based on the student's needs, may include  
33 but is not limited to assessment, nursing diagnosis, outcomes,  
34 planning, interventions, student goals if applicable, and a  
35 plan for emergencies to provide direction in managing the

1 student's health needs. The plan shall be updated consistent  
2 with timelines for individual health plans and with rules  
3 adopted by the state board of education. Personal information  
4 in the plan regarding the student shall be kept confidential  
5 as required under the federal Family Educational Rights and  
6 Privacy Act, 20 U.S.C. §1232g.

7     c. Each school district and nonpublic school attendance  
8 center shall keep the written authorization, individual health  
9 plan, and seizure action plan on file in the office of the  
10 school nurse or school administrator.

11     8. Each school district and nonpublic school attendance  
12 center shall distribute information regarding the seizure  
13 action plan to any school personnel or volunteers responsible  
14 for the supervision or care of the student.

15     9. The authorization for the administration to administer  
16 medication provided in accordance with subsection 7, paragraph  
17 "a", subparagraph (1), shall be effective for the school year  
18 in which the authorization is granted and must be renewed each  
19 following school year.

20     10. The requirements of subsections 7, 8, and 9 shall apply  
21 only to school district and nonpublic school attendance centers  
22 that have a student enrolled who has a known epilepsy diagnosis  
23 or seizure disorder or has a seizure rescue medication or  
24 medication prescribed to treat seizure disorder symptoms  
25 approved by the United States food and drug administration  
26 prescribed by the student's health care provider.

27     11. Every school district attendance center may provide an  
28 age-appropriate seizure education program to all students on  
29 seizures and seizure disorders. The seizure education program  
30 shall be consistent with guidelines published by the epilepsy  
31 foundation of America and any successor organization. The  
32 state board of education shall adopt rules pursuant to chapter  
33 17A for implementation of this section.

34     12. A school district or nonpublic school, school district  
35 or nonpublic school employee, or school district or nonpublic

1 school agent acting in good faith and in compliance with the  
2 student's individual health plan and the instructions of the  
3 student's licensed health care professional, and who provides  
4 assistance or services under this section, shall not be  
5 liable for any claim for injuries or damages arising from the  
6 provision of services provided under this section to students  
7 with epilepsy or seizure disorders.

8 13. The department of education shall develop and implement  
9 a seizure education program statewide.

10 Sec. 2. DEPARTMENT OF EDUCATION — SCHOOL DISTRICT  
11 HEALTH-RELATED TRAINING REQUIREMENTS TASK FORCE.

12 1. The department of education, in collaboration with the  
13 department of public health, shall convene a school district  
14 health-related training requirements task force to review  
15 health-related training requirements established in the Code  
16 and the administrative code, with which school districts must  
17 comply. The task force shall review the current requirements  
18 to determine whether the current training requirements are  
19 appropriate, identify the classifications of school personnel  
20 for whom such training is warranted, develop timelines for  
21 frequency of such training and training updates for the  
22 classifications of school personnel, and propose modification  
23 or elimination of requirements that are outdated. The task  
24 force shall develop a uniform training framework that school  
25 districts may follow to provide health-related training in the  
26 most efficient and effective manner.

27 2. Voting members of the task force shall include persons  
28 deemed appropriate by the department of education, in  
29 collaboration with the department of public health.

30 3. The department of education and the department of  
31 public health shall work cooperatively to provide staffing and  
32 administrative support to the task force.

33 4. The task force shall submit its uniform training  
34 framework, findings, and recommendations to the general  
35 assembly by December 30, 2021.

1 EXPLANATION

2 The inclusion of this explanation does not constitute agreement with  
3 the explanation's substance by the members of the general assembly.

4 This bill requires school districts and accredited  
5 nonpublic schools that have a student enrolled who has a  
6 known epilepsy diagnosis or seizure disorder or has a seizure  
7 rescue medication or medication prescribed to treat seizure  
8 disorder symptoms to have an individual health plan, including  
9 a seizure action plan if appropriate, requires school districts  
10 and accredited nonpublic schools to provide certain training  
11 relating to seizures to relevant school employees, requires  
12 the state board of education to adopt rules for implementation  
13 of new Code section 280.13D, and requires the department of  
14 education to develop and implement a seizure education program  
15 statewide.

16 The bill requires school districts and accredited nonpublic  
17 schools to have at least one school employee at each school  
18 who has met the training requirements for administering  
19 medications and vagus nerve stimulation. The presence of a  
20 full-time registered nurse who assumes responsibility for  
21 the administration of seizure medications and vagus nerve  
22 stimulation meets this requirement. However, school personnel,  
23 other than a registered nurse, are not required to administer a  
24 suppository to a student.

25 The bill includes definitions and requirements relating to  
26 the development of individual health plans and seizure action  
27 plans.

28 Every school attendance center shall provide training to  
29 school personnel or volunteers responsible for the supervision  
30 or care of students. The training must be fully consistent  
31 with programs and guidelines developed by the epilepsy  
32 foundation of America.

33 Further, each school district must require all school  
34 personnel to undergo approved seizure recognition and first aid  
35 training on a biennial basis. The new Code section shall not

1 be construed to limit the authority of a school district or the  
2 department to require additional seizure disorder training.

3 Prior to administering medication prescribed to treat a  
4 student's seizure disorder symptoms, the student's parent or  
5 guardian must provide the school with a written authorization  
6 to administer the medication at school.

7 The parent or guardian of a student diagnosed with a  
8 seizure disorder may collaborate with licensed health care  
9 professionals, including the school nurse or education team,  
10 in the development of an individual health plan, and a seizure  
11 action plan if appropriate, consistent with the state board's  
12 rules. The individual health plan or seizure plan, based  
13 on the student's needs, may include assessment, nursing  
14 diagnosis, outcomes, planning, interventions, student goals, if  
15 applicable, and a plan for emergencies to provide direction in  
16 managing the student's health needs. The plan must be updated  
17 consistent with individual health plan timelines and state  
18 board of education rules.

19 Each school shall keep the parent's written authorization  
20 requesting medication administration at school, the individual  
21 health plan, and the seizure action plan on file in the office  
22 of the school nurse or school administrator, and distribute  
23 information regarding the seizure action to any school  
24 personnel or volunteers responsible for the student. The  
25 health plan information is confidential under federal law.

26 Provisions relating to the administration of medication  
27 prescribed to treat a specific student's seizure disorder  
28 symptoms, and to distribution of information about a specific  
29 student's seizure action plan to persons responsible for the  
30 supervision or care of the student apply only to schools that  
31 have a student enrolled who has a known epilepsy diagnosis  
32 or seizure disorder or has a seizure rescue medication or  
33 medication prescribed to treat seizure disorder symptoms.

34 Every school district may provide an age-appropriate seizure  
35 education program to all students on seizures and seizure

1 disorders.

2     A school district, school district employee, or agent  
3 who acts in good faith to provide assistance or services in  
4 compliance with the student's individual health plan and the  
5 instructions of the student's licensed health care professional  
6 shall not be liable for any claim for injuries or damages  
7 arising from the provision of such services to students with  
8 epilepsy or seizure disorders.

9     The bill directs the department of education, in  
10 collaboration with the department of public health, to  
11 convene a school district health-related training requirements  
12 task force to review health-related training requirements  
13 established in the Code and the Iowa administrative code, with  
14 which school districts must comply.

15     Voting members of the task force shall include persons  
16 deemed appropriate by the department of education, in  
17 collaboration with the department of public health. The  
18 departments shall work cooperatively to provide staffing and  
19 administrative support to the task force.

20     The task force shall submit its uniform training framework,  
21 findings, and recommendations to the general assembly by  
22 December 30, 2021.